Applicants: Richard M. Chesbrough et al. Filed: November 17, 2003

Application No: 10/707,044

Page 3 of 25

## Amendments to the Specification:

Please replace paragraph [0005] with the following amended paragraph:

[0005] Tissue biopsies-biopsy utilizing using a biopsy cannula are is a well-known procedure for diagnosing the presence of a malignancy in a tissue mass comprising a tissue anomaly, such as a lesion. If the results of the biopsy indicate the presence of a malignancy, a follow-up surgical procedure involving excision of the lesion is frequently performed. In certain tissue masses, such as breast tissue, it may be difficult to locate the lesion through palpation or visual observation. Contemporary imaging techniques can image a lesion slightly larger than the size of a subsequent biopsy specimen. Thus, after the biopsy specimen is taken, the remaining lesion can be too small to be imaged, making it difficult to find the lesion for surgical excision.

Please replace paragraph [0019] with the following amended paragraph:

[0019] Another embodiment relates to a method for localizing and marking an area of interest in a tissue mass, the method-comprises comprising the steps of providing a medical device comprising an imaging element and a guide element connected to the imaging element, inserting the medical device into the tissue mass so that at least part of the guide element extends exteriorly of the tissue mass, and removing at least a portion of the guide element so that no portion of the guide element extends exteriorly of the tissue mass.

Please replace paragraph [0020] with the following amended paragraph:

[0020] In yet another embodiment, the invention relates to a delivery apparatus for the percutaneous placement of a medical device at an area of interest in a tissue mass to facilitate subsequent determination of the area of interest, the delivery apparatus comprising comprises an introducer comprising a cannula defining a lumen and having a proximal end, a distal end forming an insertion tip, and an expulsion opening near the insertion tip, a stylet having a distal end slidably received within the lumen, and when the delivery apparatus is in a ready position, the distal end is spaced inwardly from the insertion tip to form a recess between the distal end and the insertion tip, and a medical

Applicants: Richard M. Chesbrough et al. Filed: November 17, 2003

Application No: 10/707,044

Page 4 of 25

device positioned within the recess comprising an imaging element for subcutaneous placement in a tissue mass to identify an area of interest in the tissue mass, and a guide element connected to the imaging element and having a separable portion, wherein the cannula is inserted into the tissue mass such that when the stylet is advanced into the recess, the medical device is expelled through the expulsion opening into the tissue mass, and when the cannula is withdrawn from the tissue mass, the imaging element is placed within the tissue mass at the area of interest, and at least part of the guide element extends exteriorly of the tissue mass, and when the separable portion is separated from the guide element, no part of the guide element extends exteriorly of the tissue mass.

Following paragraph [0027] please add the following new paragraph:

FIG. 4D is an enlarged view of the releasable connection shown in FIG. 4B shown in a released state.

Please replace paragraph [0036] with the following amended paragraph:

[0036] Figure 7 is an enlarged view of the combination localizing and marking apparatus after placement in the tissue mass and withdrawal of the introducer and showing the imaging element at the lesion and the guide element extending exteriorly of the body.

Please replace paragraph [0048] with the following amended paragraph:

[0048] The releasable connection 60 can take one of several different structures. For example, as illustrated in FIG. 4A, the releasable connection 60 can comprise a spot weld 62 on the guide element 14 at or near the hub 54. The spot weld 62 results in a localized weakness in the guide element 14 enabling the guide element 14 to be separated at that point. As illustrated in FIG. 4B and FIG. 4D, the releasable connection 60 can also comprise a threaded connection 64, in which the end of the guide element 14 is provided with male threads and the hub 54 is provided with cooperating female threads. The guide element 14 is threaded to the imaging element 52 for insertion into the tissue mass.

Applicants: Richard M. Chesbrough et al. Filed: November 17, 2003

Application No: 10/707,044 Page 5 of 25

Twisting of the guide element 14 after insertion will unthread the guide element 14 from the imaging element 52 for removal of the guide element 14 from the tissue mass.